# UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

August 31, 2006

Adrian Krygsman
Director, Product Registration
Troysan Chemical Corporation
8 Vreeland Rd.
P.O. Box 955
Florham Park, NJ 07932

Subject:

· Troysan® Polyphase P100

EPA Registration No.: 5383-50 Application Date: Aug 9, 2006 Receipt Date: Aug 10, 2006

Dear Mr. Krygsman,

This acknowledges receipt of your notification, submitted under the provision of PR Notice 98-10, FIFRA section 3(c)9.

# **Proposed Notification**

Addition of alternate brand name 'Polyphase® FC'

#### **General Comments**

Based on a review of the material submitted, the following comments apply:

The notification application is acceptable and a copy has been inserted in your file for future reference.

Should you have any questions or comments concerning this letter, please contact me at (703) 308-6422.

Sincerely,

Adam Heyward

Product Manager (34)

Regulatory Management Branch II Antimicrobials Division (7510P)

| CONCURRENCES |         |  |   |  |  |  |  |   |
|--------------|---------|--|---|--|--|--|--|---|
| YMBOL        | 7510P   |  | _ |  |  |  |  |   |
| JRNAME       | Grahy   |  |   |  |  |  |  |   |
| ATE          | 8/25/06 |  |   |  |  |  |  | · |
|              |         |  |   |  |  |  |  |   |

EPA Form 1320-1A (1/90)

| Please read instructions on reverse bet                     | fore completing form.                   |  | Form Approved, OMB No. 2070-0060, Approval expires 05-31-98   |                    |                             |  |  |
|---|---|--|---|--------------------|-----------------------------|--|--|
| O EDA   | United State                            | es                                     | ☐ Regis   | tration            | OPP Identifier Number       |  |  |
| EPA En  | vironmental Protec                      | ction Agency                           |   | dment              | 306862                      |  |  |
|   | Washington, DC                          | 20460                                  | ⊠ Other:  |                    | 000002                      |  |  |
|   | Applic                                  | ation for Pe                           | esticide - Section  |                    |                             |  |  |
| Company/Product Number                                      | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |  | Product Manager   |                    | 3. Proposed Classification  |  |  |
| 5383-50   | Adam H                                  |  |   |                    |                             |  |  |
| 4. Company/Product (Name) Troysan Polyphase P100            |   | PM#<br>34                              |   |                    | None Restricted             |  |  |
| 5. Name and Address of Applicant (                          |   | 6. Exp                                 | 6. Expedited Review. In accordance with FIFRA Section 3(c)(3) |                    |                             |  |  |
| Troy Chemical Corporation                                   | 1                                       |  |   |                    | n composition and labeling  |  |  |
| 8 Vreeland Road   |   | to:                                    | 1   |                    |                             |  |  |
| Florham Park, N.J. 07932                                    |   |  | eg. No  |                    |                             |  |  |
| PLEASE SEND ALL COR   |   | $\underline{o} \mid$ Produc            | Product Name  |                    |                             |  |  |
| <u>"CONTACT POINT" I</u>                                    |   | Tiodax                                 | A INGITIC   |                    |                             |  |  |
| Check if this is a new a                                    | ddress                                  |  |   |                    |                             |  |  |
|   |   | Section                                | on - II   |                    |                             |  |  |
| Amendment – Explain below.                                  |   |  |   | •                  | Agency letter dated         |  |  |
| Resubmission in response to A                               | Agency letter dated                     | ************************************** | Me Too" Applie  |                    |                             |  |  |
| Notification - Explain below.  Explanation: Use additiona   | I nane(s) if necessar                   | ry (Eor Secti                          | Other - Explain   |                    |                             |  |  |
| Explanation. Ose additiona                                  | ii paye(s) ii necessai                  | ry. (i oi secu                         | on rand Section   | u. <i>)</i>        |                             |  |  |
| Submission of Alternate Brai                                | nd Name (ABN)                           |  |   |                    |                             |  |  |
|   |   |  |   |                    |                             |  |  |
|   |   |  |   |                    |                             |  |  |
|   |   |  |   |                    |                             |  |  |
|   |   |  |   |                    |                             |  |  |
|   |   |  |   |                    |                             |  |  |
|   |   | Section                                | on - III  |                    |                             |  |  |
| Material This Product Will Be Pa Child-Resistant Packaging  | ckaged In:<br>Unit Packaging            |  | Water Soluble Page  | rkasina            | 2. Type of Container        |  |  |
| Yes*  | Yes                                     |  | Yes Yes   | Skaying            | Metal                       |  |  |
| ∏ No  | │                                       |  | ☐ No  |                    | Plastic                     |  |  |
|   | If "Yes"                                | No. per                                | If "Yes"  | No. per            | Glass                       |  |  |
| *Certification must   | Unit Packaging wgt.                     | container                              | Package wgt.  | container          | Paper                       |  |  |
| be submitted  |   | -                                      |   |                    | Other (Specifiy)            |  |  |
| Location of Net Contents Information                        | ation 4. Size(                          | s) Retail Contain                      | ier   | 5. Location of     | Label Directions            |  |  |
| Label Con   | tainer                                  |  |   | On Label           |                             |  |  |
| Manner in Which Label is Affixed                            | t to Product                            | iograph                                | Other   | On labeli          | ng accompanying product     |  |  |
| O. Mariner in Which Laber is Alliked                        |   | oer glued                              | Li Other  |                    |                             |  |  |
|   | = '                                     | nciled                                 |   |                    | ··                          |  |  |
|   |   | Sectio                                 | n - IV  |                    |                             |  |  |
| Contact Point (Complete items di                            | rectly below for identificat            | tion of individual                     | to be contacted, if nec                                       | essary, to process | this application)           |  |  |
| Name  |   | Title                                  | D 1 (D 1)   |                    | Telephone No. (Include Area |  |  |
| Adrian Krygsman   | į                                       | Di                                     | irector, Product Registra                                     | tion               | Code)<br>973-443-4200       |  |  |
|   | Certific                                | ation                                  | * 0 .00 × 1*0   |                    | 6. Date Application         |  |  |
| I certify that the statements I have n                      | nade on this form and all               | attachments ther                       |   |                    | Received                    |  |  |
| acknowledge that any knowingly fal<br>under applicable law- | se or misleading stateme                | nt may be punish                       | able by fine or impriso                                       | onment or both     | (Stamped)                   |  |  |
| 2. Signature 3. Title                                       |   |  |   |                    |                             |  |  |
| (dd)  | //                                      |  | tor, Product Reg  | jistration         | 1                           |  |  |
| 4. Typed Name 5. Date                                       |   |  |   |                    |                             |  |  |
| Adrian Krygsr   | han U                                   |  | 8/09/06   |                    | 1<br>1                      |  |  |
|   |   |  |   |                    | 1                           |  |  |



## TROY CORPORATION

August 9, 2006

VIA DHL Courier

Document Processing Desk (NOTIF)
Office of Pesticide Programs (7504P)
Antimicrobial Division (AD)
U.S. EPA
Room S-4900, One Potomac Yard
2777 South Crystal Drive
Arlington, VA. 22202-4501

Attention:

Mr. Adam Heyward

PM 34

RE:

Submission of Notification Troysan® Polyphase® P100 EPA Reg. No. 5383-50

Dear Mr. Heyward:

Troy Corporation is submitting a product notification for the Troysan Polyphase P100. We are proposing an alternate brand name for the product as indicated below:

# Alternate Brand Name: Polyphase® FC

In order to process this request we enclose the following documents:

- 1. EPA Pesticide Application EPA Form 8570-1 (OPP Identifier No. 306862)
- 2. Four (4) copies of the revised product label with the ABN.

Please contact me directly should you have any questions concerning this notification. I can be reached via email or phone at <a href="mailto:krygsmaa@Troycorp.com">krygsmaa@Troycorp.com</a> or 973-443-4200, X2249. Thank you.

Sincerely,

Adrian Krygsman

Director, Product Registration

Cc: D. Shaw



## TROY CORPORATION

Notification of Alternate Brand Name (ABN): Troysan Polyphase P-100 Per PR Notice 98-10:

Proposed Alternate Brand Name: Polyphase® FC

This notification is consistent with the provisions of PR Notice 98-10 and EPA regulations at 40 CFR 152.46, and no other changes have been made to the labeling or the confidential statement of formula for this product. I understand that it is a violation of 18 U.S.C. Sec. 1001 to willfully make any false statement to EPA. I further understand that if this notification is not consistent with the terms of PR Notices 98-10 and 40 CFR 152.46, this product may be in violation of FIFRA and I may be subject to enforcement action and penalties under sections 12 and 14 of FIFRA.

# PRECAUTIONARY STATEMENTS HAZARDS TO HUMANS DANGER

Corrosive. Causes irreversible eye damage. Do not get in eyes, on skin, or on clothing. Harmful or fatal if swallowed or absorbed through skin. Avoid breathing dust and contact with skin, eyes or clothing. Wear goggles, face shield or safety glasses, protective clothing and rubber gloves. Wash thoroughly with soap and water after handling. Remove contaminated clothing and wash before reuse.

| FIRST AID                  |   |  |  |  |  |
|----------------------------|---|--|--|--|--|
| IF IN EYES:                | <ul> <li>Hold eye open and rinse slowly and gently with water for 15-20 minutes.         Remove contact lenses, if present, after 5 minutes, then continue rinsing.     </li> <li>Call a poison control center or doctor for treatment advice.</li> </ul>                   |  |  |  |  |
| IF ON SKIN OR<br>CLOTHING: | <ul> <li>Take off contaminated clothing.</li> <li>Rinse skin immediately with plenty of water for 15-20 minutes.</li> <li>Call a poison control center or doctor for treatment advice.</li> </ul>   |  |  |  |  |
| IF SWALLOWED:              | <ul> <li>Immediately call a poison control center<br/>or doctor. Do not induce vomiting unless<br/>told to do so by a poison control center or<br/>doctor. Do not give any liquid to the<br/>person. Do not give anything by mouth to<br/>an unconscious person.</li> </ul> |  |  |  |  |
| IF INHALED:                | <ul> <li>Move person to fresh air.</li> <li>If person is not breathing call 911 or an ambulance, then give artificial respiration preferably mouth-to-mouth if possible.</li> <li>Call a poison control center or doctor for further treatment advice.</li> </ul>           |  |  |  |  |
|                            | ainer or label with you when calling a poison   |  |  |  |  |
|                            | or, or going for treatment.   |  |  |  |  |
| NOTE TO PHYSICIAN:         |   |  |  |  |  |
| Probable mucosal dam       | nage may contraindicate the use of gastric  |  |  |  |  |
| lavage.                    |   |  |  |  |  |

## POLYPHASE® FC

A Fungicide for Use in Aqueous and Solvent Systems such as Oleo-Resinous and Latex Paints, Wood Products, Cutting Oils, Textiles, Paper Coatings, Inks, Plastics, Adhesives, Canvas and Cordage

> EPA Reg. No. 5383-50 EPA Est. No. 5383-NJ-1 INDUSTRIAL FUNGICIDE

#### **ACTIVE INGREDIENT:**

| 3-Iodo-2-Propynyl Butyl Carbamate | 97.0%       |
|-----------------------------------|-------------|
| INERT INGREDIENTS                 | <u>3.0%</u> |
| TOTAL                             | 100.0%      |

### KEEP OUT OF REACH OF CHILDREN

# **DANGER**

SOLD FOR INDUSTRIAL USE SEE SIDE PANEL FOR ADDITIONAL PRECAUTIONARY STATEMENTS

IN CASE OF EMERGENCY CALL 1-800-424-9300

1ROY CHEMICAL CORPORATION ONE AVENUE L NEWARK, N.J. 07105

Net Weight:

#### ENVIRON

This product is toxic to fish and any when disposing of equipment was containing this product into lakes, waters unless in accordance with the Discharge Elimination System (NI has been notified in writing prior to containing this product to sewer sy local sewage treatment plant author Board or Regional office of the EF

#### DIREC

It is a violation of Federal Law to with its labeling.

#### **APPLICATI**

The following are suggested use levels for the various applications indicate the approx suggestions are in percentage by weight an determine the most cost effective use level suggested.

PAINTS AND STAINS: Generally use 0. interior paints use 0.1-0.32%. For wood pr PLASTICS: Use in PVC plastics such as 0.05-0.6%.

CUTTING OILS: Use 0.03-0.3%.

WOOD: For above ground use only at rate sapstain control use 0.3% within 24 hours on wood that comes in contact with food. Should be coated with a varnish, or lacquer TEXTILES: Use for coatings or dyes at 0 PAPER COATINGS: Use in aqueous and 0.05%.

CANVAS AND CORDAGE: Use 0.05-0 ADHESIVES: Use 0.025-0.5%

INKS: Use 0.05-0.5%

#### STORAG

Do not contaminate water, food, or feed PESTICIDE STORAGE: This material low melting point. Storage temperatu are suggested.

PESTICIDE DISPOSAL: Pesticide was excess pesticides, spray mixture, or rins cannot be disposed of by use according or environmental control agency or the regional office for guidance.

CONTAINER DISPOSAL: Triple rins reconditioning, or puncture and dispose allowed by state and local authorities, b

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